OFFE 20 2006 B

nt to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

				ł
TOTAL	AMOUNT	OF	PAYMENT	1

т		
ł		
L	(\$)	180
ı	14/	100

Complete if Known				
Application Number	10/746,993			
Filing Date	December 24, 2003			
First Named Inventor	Sagner, Gregor			
Examiner Name	Pablo S. Whaley			
Art Unit	4574			
Attorney Docket No.	022101-001710US			

METHOD OF PAYMENT	(check all that apply)					
Check Credit Card Money Order None Other (please identify):						
Deposit Account Deposit Account Number: 20-1430 Deposit Account Name: Townsend and Townsend and Crew LLP						
For the above-ide	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any a	Charge any additional fee(s) or underpayments of fee(s)					
Under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card						
information and authorization						
FEE CALCULATION					*****	
1. BASIC FILING, SEAL	RCH, AND EXAMINA	TION FEES				
	FILING FEES		CH FEES		ATION FEES	
Application Type	Small Entity Fee (\$) Fee (\$)	_	mall Entity Fee (\$)	<u>Sr</u> <u>Fee (\$)</u>	nall Entity Fee (\$)	Fees Paid (\$)
			250	200	100	
Utility	300 150	500				
Design	200 100	. 100	50	130	65	
Plant	200 100	300	150	160	80	···
Reissue	300 150	500	250	600	300	
Provisional	200 100	0	0	0 '	0	
2. EXCESS CLAIM FEES Small Entity						
Fee Description					Fee (\$)	Fee (\$)
Each claim over 20 (i					50	25
	im over 3 (including l	Reissues)	•		200	100
Multiple dependent c		(\$) Foo F	aid (E)		360	180 endent Claims
Total Claims	EXTRA CIAIMS PE	ee (\$)	'aid (\$)		Fee (\$)	Fee Paid (\$)
HP = highest number of total cla		20			-33-147	
Indep. Claims	Extra Claims Fe	e (\$) Fee P	aid (\$)			
	= ×					
HP = highest number of indepen		ter than 3			•	
3. APPLICATION SIZE				-14 - 111	. 61. 1	
If the specification and	drawings exceed 100 FR 1.52(e)), the applic					
	nereof. See 35 U.S.C.				in chiny) for ca	
Total Sheets	Extra Sheets				hereof Fee (\$)	Fee Paid (\$)
		(1				=
4. OTHER FEE(S)						Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge): Submission of Information Disclosure Stmt 180					180	

SUBMITTED BY		1		
Signature	(Registration No (Attorney/Agent)	Telephone 415-576-0200
Name (Print/Type)	Matthew	E. Hinsch		 Date December (13), 2006